20. Focility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

DO NOT WRITE BELOW THIS LINE.

Month

E. GENERATOR SENDS THIS COPY TO DTSC WITHIN 30 DAYS.
P.O. Box 400, Sacramento, CA 95812-0400

TRISTATE

Day

Year